

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO.

10/560999

FILING DATE

2/13/2006

APPLICANT(S)

191965

JMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1		1	
2			1		1	
3					1	2
4					1	
5					1	
6					1	
7					1	
8					1	
9					1	
10					1	
11					1	
12					1	
13					1	
14					1	
15					1	
16					1	
17					1	
18					1	
19					1	
20					1	
21					1	
22					2	1
23					1	
24					1	
25					1	
26					1	
27					1	
28					1	
29					1	
30					1	
31					1	
32					1	
33					1	
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42					1	
43					1	
44					1	
45					1	
46					1	
47					1	
48					1	
49					1	
50					1	
TOTAL IND.			3		3	
TOTAL DEP.			30		30	
TOTAL CLAIMS			33		33	

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						